Fill in this inform	nation to identify your	case:		
Debtor 1	Jae Young Yum			
I	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F PENNSYLVANIA, PHILADE	ELPHIA
Case number	17-14599			D Charl
(ii kilowii)				☐ Chec

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

	$\square$ You are claiming state and federal nonbank	ruptcy exemptions. 11 l	U.S.C	. § 522(b)(3)		
	■ You are claiming federal exemptions. 11 U	.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exer	npt, f	ill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	1429 Bellevue Ln	\$464,653.00		\$23,675.00	11 USC § 522(d)(1)	
	Souderton PA, 18964-2547 County: Montgomery Line from Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit		
	Various items Line from Schedule A/B 6.1	\$8,500.00		\$8,500.00	11 USC § 522(d)(3)	
	Line Iron Schedule A/B. 0.1		☐ 100% of fair market value, up to any applicable statutory limit			
	Clothing Line from Schedule A/B 11.1	\$300.00		\$300.00	11 USC § 522(d)(3)	
	Line Holli Schedule A/L 11.1			100% of fair market value, up to any applicable statutory limit		
	Wells Fargo Bank Line from Schedule A/B 17.1	\$20.00		\$20.00	11 USC § 522(d)(5)	
	Line non conceane 702 TTT			100% of fair market value, up to any applicable statutory limit		
	Wells Fargo Bank Line from Schedule A/B 17.2	\$20.00		\$20.00	11 USC § 522(d)(5)	
	LINE HOLL SCHEUUIE AVD. 11.2			100% of fair market value, up to any applicable statutory limit		

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3.	•	aiming a homestead exemption of more than \$160,375? adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
	No	
	Yes. [	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No
		Yes

Official Form 106C

Case 17-14599-jkf Doc 12 Filed 07/27/17 Entered 07/27/17 09:10:17 Desc Main Document Page 3 of 14 Fill in this information to identify your case: Debtor 1 Jae Young Yum Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name EASTERN DISTRICT OF PENNSYLVANIA, PHILADELPHIA United States Bankruptcy Court for the: DIVISION Case number 17-14599 (if known) ☐ Check if this is an amended filing Official Form 106D 12/15

Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? □ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor 's name. Do not deduct the that supports this portion value of collateral. If any **Honda Financial** 2.1 \$0.00 \$20,955.00 \$0.00 Describe the property that secures the claim: Services Creditor's Name 2015 Honda Pilot PO Box 7829 As of the date you file, the claim is: Check all that Philadelphia, PA 19101-7829 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured) ■ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a Car Ioan Other (including a right to offset) community debt Last 4 digits of account number Date debt was incurred 4869 Describe the property that secures the claim: \$383,040.00 \$464,653.00 \$0.00 **Nationstar Mortgage** Creditor's Name 1429 Bellevue Ln, Souderton, PA 18964-2547 As of the date you file, the claim is: Check all that PO Box 619063 Dallas, TX 75261-9063 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated ☐ Disputed Who owes the debt? Check one Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only

4722 Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property

Judgment lien from a lawsuit

Other (including a right to offset)

☐ Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

1st Mortgage

Debtor 1 and Debtor 2 only

community debt Date debt was incurred

☐ At least one of the debtors and another

☐ Check if this claim relates to a

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Debtor 1 Jae Young Yum		Case number (if know)	17-14599		
First Name Middl	e Name Last Name				
Charielized Loop					
2.3 Specialized Loan Servicing LLC	Describe the property that secures the claim:	\$50,496.78	\$464,653.00	\$0.00	
Creditor's Name	1429 Bellevue Ln, Souderton, PA			<u> </u>	
	18964-2547				
DO Dov 405240	As of the date you file, the claim is: Check all that				
PO Box 105219 Atlanta, GA 30348-5219	apply.				
Number, Street, City, State & Zip Code	_ ☐ Contingent ☐ Unliquidated				
Number, Street, City, State & Zip Code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage or se	ecured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and anothe	r				
☐ Check if this claim relates to a community debt	■ Other (including a right to offset) 2nd mort	gage			
Date debt was incurred	Last 4 digits of account number 8161				
2.4 Toyota Motor Credit	Describe the property that secures the claim:	\$21,000.00	\$13,917.00	\$7,083.00	
Creditor's Name	2017 Toyota Camry		<u> </u>		
5005 N River Blvd NE	As of the date you file, the claim is: Check all that				
Cedar Rapids, IA	apply.				
52411-6634	_ Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage or second car loan)	ecured			
Debtor 2 only	Cai loaii)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and anothe	r				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Car loan				
Date debt was incurred	Last 4 digits of account number 0683	<u> </u>			
			_		
	Column A on this page. Write that number here:	\$454,536.7	78		
If this is the last page of your form, add Write that number here:	I the dollar value totals from all pages.	\$454,536.7	78		
Part 2: List Others to Be Notified	for a Debt That You Already Listed				

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page!	5 of 14		
Fill in this infor	rmation to identify your	case:				
Debtor 1	Jae Young Yum					
	First Name	Middle Name	Last Name		- }	
Debtor 2					_	
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF PEN DIVISION	NSYLVANIA	., PHILADELPHIA	_	
Case number	17-14599					
(if known)						heck if this is an
					a	mended filing
Official For	m 106E/E					
		/ha Haya Uncasurad	Claima			12/15
		/ho Have Unsecured Part 1 for creditors with PRIORIT		D. (0.6)	NONDRIGHTY	
Schedule G: Exec D: Creditors Who the Continuation I case number (if ki	eutory Contracts and Unexp Have Claims Secured by P Page to this page. If you ha nown).	that could result in a claim. Also li ired Leases (Official Form 106G). D operty. If more space is needed, co ve no information to report in a Par	o not include	any creditors with part ou need, fill it out, numl	ially secured claims t ber the entries in the	hat are listed in Schedule boxes on the left. Attach
	All of Your PRIORITY Un					
	tors have priority unsecure	d claims against you?				
■ No. Go to	Part 2.					
☐ Yes.						
Part 2: List /	All of Your NONPRIORIT	Y Unsecured Claims				
_ `	itors have nonpriority unser	art. Submit this form to the court with	your other sch	edules.		
unsecured cla	aim, list the creditor separatel	aims in the alphabetical order of the y for each claim. For each claim listed ist the other creditors in Part 3.If you h	, identify what	type of claim it is. Do not	list claims already incl	uded in Part 1. If more
						Total claim
4.1 Bank o	of America	Last 4 digits of acc	ount number	6910		\$19,906.94
	rity Creditor's Name					,
DO Do	4E040	When was the debt	incurred?			-
	ox 15019 ngton, DE 19886-5019					
	Street City State Zlp Code		file, the claim	is: Check all that apply		
Who inc	curred the debt? Check one.					
■ Debte	or 1 only	☐ Contingent				
☐ Debto	or 2 only	☐ Unliquidated				
☐ Debto	or 1 and Debtor 2 only	☐ Disputed				
☐ At lea	ast one of the debtors and an	other Type of NONPRIOR	RITY unsecure	ed claim:		
☐ Chec	ck if this claim is for a com	munity				
debt		☐ Obligations arisir		aration agreement or dive	orce that you did not	
_	aim subject to offset?	report as priority clai				
■ No		☐ Debts to pension	or profit-shari	ng plans, and other simila	ar debts	
☐ Yes		Other. Specify				_

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Debtor 1 Yum, Jae Young Case number (if know) 17-14599 4.2 Last 4 digits of account number \$4,631.14 **Bank of America** 1695 Nonpriority Creditor's Name When was the debt incurred? PO Box 15019 Wilmington, DE 19886-5019 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 chase cardmember service Last 4 digits of account number 3607 \$1,111.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 1423 Charlotte, NC 28201-1423 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 Last 4 digits of account number \$7,290.21 Discover 1975 Nonpriority Creditor's Name When was the debt incurred? PO Box 742655 Cincinnati, OH 45274-2655 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Debto	Case 17-14599-jkf Doc 12	Filed 07/27/17 Entered 07/27/17 09:10:17 Description Document Page 7 of 14 Case number (f know) 17-14599	c Main
4.5	Discover Ban	Last 4 digits of account number 1975	\$100.00
	Nonpriority Creditor's Name	<del></del>	<b></b>
	PO Box 71084 Charlotte, NC 28272-1084 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	_	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.6	Wells Fargo Bank NA Nonpriority Creditor's Name	Last 4 digits of account number 1998	\$89,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 14529 Des Moines, IA 50306-3529 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.7	Wells Fargo card Services Nonpriority Creditor's Name	Last 4 digits of account number 1192	\$2,245.99
		When was the debt incurred?	
	PO Box 5284 Carol Stream, IL 60197-5284  Number Street City State Zlp Code	As of the data you file the plain in Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ No
□ Yes

report as priority claims

Other. Specify

Is the claim subject to offset?

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Yum, Jae Young 17-14599

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	<u> </u>	0.00
				<sup>φ</sup> ——	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			0.00
		you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	124,285.28
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	124,285.28

Fill in this inforr	mation to identify your	case:		
Debtor 1	Jae Young Yum			
	First Name	Middle Name	Last Name	1
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA, PHILADEL	PHIA
Case number	17-14599			
(if known)				☐ Check if this is a amended filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease   State what the contract or lease is for						
Number   Street		Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
Number   Street	2.1					
City         State         ZIP Code           2.2         Name         Number         Street           City         State         ZIP Code           2.3         Name         City         State         ZIP Code           2.4         Name         City         State         ZIP Code           2.5         Number         Street         Street           Number         Street         Street		Name				_
Number   Street   State   ZIP Code		Number	Street			
Number   Street   State   ZIP Code		City		State	ZIP Code	<del>_</del>
Number Street  City State ZIP Code  2.3  Name  Number Street  City State ZIP Code  2.4  Name  Number Street  City State ZIP Code  2.5  Name  Number Street	2.2	O.t.y		Oldio		
City         State         ZIP Code           2.3         Name         Number         Street           City         State         ZIP Code           2.4         Name         Number         Street           City         State         ZIP Code           2.5         Name         Name           Number         Street         Street	2.2	Name				
2.3   Name   Street   City   State   ZIP Code    2.4   Name   Number   Street   City   State   ZIP Code    2.5   Name   Name   Street   City   State   ZIP Code    2.5   Name   Name   Street   City   State   ZIP Code    3.6   Name   Street   City   State   ZIP Code    4.7   Name   Street   City   State   ZIP Code    5.8   Name   Street   City   Street   City   City			Street			_
Number Street  City State ZIP Code  2.4  Number Street  City State ZIP Code  2.5  Number Street  Number Street  Number Street  State ZIP Code		City		State	ZIP Code	
Number Street  City State ZIP Code  2.4  Number Street  City State ZIP Code  2.5  Number Street  Number Street  Number Street  State ZIP Code	2.3					
City         State         ZIP Code           2.4         Name         Number         Street           City         State         ZIP Code           2.5         Name         Number         Street		Name				<del>-</del>
2.4 Name  Number Street  City State ZIP Code  2.5 Name  Number Street			Street			
Number Street  City State ZIP Code  2.5  Name  Number Street		City		State	ZIP Code	
Number Street  City State ZIP Code  2.5  Name  Number Street	2.4					
City         State         ZIP Code           2.5         Name           Number         Street		Name				_
Number Street			Street			
Number Street		City		State	ZIP Code	
Number Street	2.5					
		Name				_
City State ZIP Code			Street			_
		City		State	ZIP Code	_

	<u> </u>	Docume	nt Page 10 c	of 14	
Fill in this i	information to identify your o	ase:			
Debtor 1	Jae Young Yum				
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing	g) First Name	Middle Name	Last Name		
,- <b>,</b> -,	9)			II ABELBUIA	
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF DIVISION	F PENNSYLVANIA, PH	ILADELPHIA 	
Case numb	per 17-14599				
if known)					Check if this is an amended filing
Official	Form 106H				
	ule H: Your Code	ebtors			12/15
<del></del>	alo III. Iodi ood	35(0) 0			12/13
nd number ase numbe		the left. Attach the Addition uestion.	onal Page to this page.	. On the top of any Ad	opy the Additional Page, fill it out, ditional Pages, write your name and
■ N.		- ,			
■ No □ Yes					
<b>—</b> 103					
	nin the last 8 years, have you nia, Idaho, Louisiana, Nevada,				states and territories include Arizona,
■ No.	Go to line 3.				
☐ Yes.	Did your spouse, former spous	e, or legal equivalent live wi	th you at the time?		
line 2 a	again as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor o	or cosigner. Make sure	you have listed the c	with you. List the person shown in reditor on Schedule D (Official Form le E/F, or Schedule G to fill out
	Column 1: Your codebtor lame, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	e
	Name			_ ☐ Schedule E/F,	
				☐ Schedule G, lin	ne
	Number Street City	State	ZIP Code	<del>_</del>	
3.2	Name			_ ☐ Schedule D, lin☐ Schedule E/F,	
				☐ Schedule E/F,	
_	Number Street				- <u> </u>
	Number Street City	State	ZIP Code		

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	in this information to identify your obtor 1  Jae Young						
Dei	btor 1 Jae Young	Yum					
_	btor 2 buse, if filing)						
Uni	ited States Bankruptcy Court for th	e: EASTERN DISTRICT		۸,			
Cas	se number <b>17-14599</b>				Check if this is:		
	nown)		=		☐ An amende		
					☐ A suppleme	ent showing postpetition of the following date:	chapter 13
	fficial Form 106I				MM / DD/ Y	YYY	
S	chedule I: Your Inc	ome					12/15
atta Par	use. If you are separated and you che a separate sheet to this form.  It 1: Describe Employment	On the top of any addition					
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse	
	If you have more than one job,	Employment status	■ Employed		■ Emplo	oyed	
	attach a separate page with information about additional employers.		☐ Not employed		☐ Not e	mployed	
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name	FedEx		Bloomi	ng Nail	
	Occupation may include student homemaker, if it applies.	Or Employer's address	30 Fed Ex Pkwy Collierville, TN		8 Airpo North V	ort Sq Vales, PA 19454-14	19
		How long employed the	here?				
Par	rt 2: Give Details About Mo	nthly Income					
	mate monthly income as of the case you are separated.	ate you file this form. If y	ou have nothing to rep	ort for any line, w	rrite \$0 in the spa	ace. Include your non-filir	ng spouse
	ou or your non-filing spouse have mo		bine the information fo	r all employers fo	r that person on	the lines below. If you ne	ed more
				Fo	or Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$	3,749.20	\$3,250.00	
3.	Estimate and list monthly over	time pay.		3. +\$	0.00	+\$0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4. \$	3 749 20	\$ 3,250,00	

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Deb	tor 1	Yum, Jae Young	_	Cas	se number (if known)	17-14599		
				F	or Debtor 1	For Debtor		
	Con	y line 4 here	4.	\$	3,749.20	non-filing	3,250.00	
	OOP.	y line 4 here	٦.	Ψ	3,749.20	Ψ	,230.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	735.53	\$	301.69	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: dlSab	5h.+	- \$	2.64	+ \$	0.00	
		voluntary deduction	_	\$	913.16	\$	0.00	
		mcwh		\$	0.00	\$	47.15	
		sswh		\$	0.00	\$	201.50	
		sitw		\$	0.00	\$	99.80	
		Litw		\$	0.00	\$	32.50	
		Pasui		\$	0.00	\$	2.30	
				\$	0.00	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,651.33	\$	684.94	
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,097.87	\$ 2	2,565.06	
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		•	0.00	·		
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce	_			•		
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h	+ \$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	— 9.	\$	0.00	\$	0.00	7
		<b>C</b>		Ľ=	0.00			<u> </u>
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$		2,097.87 + \$	2,565.06	\$ = \$	4 662 02
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.   \$		2,097.87 + \$	2,363.06		4,662.93
11.		e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your de		nte v	rour roommatee an	d		
		r friends or relatives.	sperider	нэ, у	our roommates, an	u		
		ot include any amounts already included in lines 2-10 or amounts that are not ava	ailable to	o pay	expenses listed in	Schedule J.		
	Spec	cify:				11.	+\$	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The resu	ult is the	con	nbined monthly inc			
		e that amount on the Summary of Schedules and Statistical Summary of Certain					\$	4,662.93
							Combine	
13.	Do y	ou expect an increase or decrease within the year after you file this form?	?					
		No.						
		Yes. Explain:						

Fill in this in	nformation to identify you	ur case:				
Debtor 1	Jae Young Yu			<i>f</i>	c if this is:	
Debtor 2 (Spouse, if fil	ling)				A supplement show expenses as of the	ing postpetition chapter 13 following date:
	s Bankruptcy Court for the:	EASTERN DISTRICT OF PEN PHILADELPHIA DIVISION	NSYLVANIA,	_	MM / DD / YYYY	
Case numbe (If known)	17-14599					
	l Form 106J Iule J: Your E			•		4044
Be as compinformation	plete and accurate as p	possible. If two married people eded, attach another sheet to thi				
Part 1:	Describe Your Househ	hold				
	a joint case?					
	. Go to line 2. s. Does Debtor 2 live in	n a separate household?				
	☐ No ☐ Yes. Debtor 2 must	st file Official Form 106J-2, <i>Expens</i>	es for Separate Housel	noldof Debtor	2.	
2. <b>Do yo</b>	u have dependents?	□ No				
Do not Debto	t list Debtor 1 and r 2.	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
Do no	t state the					□ No
depen	dents names.		Daughter		10	Yes
			Daughter		7	□ No ■ Yes
			Dauginer		<u>'</u>	■ res
						☐ Yes
						□ No
0 <b>D</b> awa	:	<u>_</u>				☐ Yes
•	ur expenses include ses of people other that	■ No				
	elf and your dependent					
Estimate y	as of a date after the ba	ng Monthly Expenses nur bankruptcy filing date unless ankruptcy is filed. If this is a su				
	ich assistance and hav	on-cash government assistance ve included it on Schedule I: Yo			Your exp	enses
(Omolar i						
	ental or home ownershi ents and any rent for the g	nip expenses for your residence ground or lot.	. Include first mortgage	4. \$		2,667.00
If not	included in line 4:					
4a.	Real estate taxes			4a. \$		0.00
	Property, homeowner's,	or renter's insurance		4b. \$		0.00
		pair, and upkeep expenses		4c. \$		100.00
		on or condominium dues	hama aquitu la a	4d. \$		50.00
<ol><li>Additi</li></ol>	onai mortgage paymer	nts for your residence, such as	nome equity loans	5. \$		258.00

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Debtor 1	Yum, Jae Young	Case num	ber (if known)	17-14599
6. <b>Util</b> 6a.	ties: Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	· —	
			\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.	\$	450.00
	dcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	150.00
o. Per	sonal care products and services	10.	\$	0.00
l. Me	lical and dental expenses	11.	\$	0.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	150.00
	not include car payments.		· · · · · · · · · · · · · · · · · · ·	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	70.00
	ritable contributions and religious donations	14.	\$	0.00
	irance.			
	not include insurance deducted from your pay or included in lines 4 or 20.	150	¢	220.00
	Life insurance	15a.	·	330.00
	. Health insurance	15b.	·	0.00
	Vehicle insurance	15c.		0.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	cify:	16.	\$	0.00
	allment or lease payments:	170	¢.	400.00
	Car payments for Vehicle 1	17a.	·	400.00
	. Car payments for Vehicle 2	17b.	· —	0.00
	Other. Specify:	17c.	\$	0.00
	. Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.		
	er payments you make to support others who do not live with you.	40	\$	0.00
	cify:	19.	rlnaama	
	er real property expenses not included in lines 4 or 5 of this form or on Schedul.  Mortgages on other property	ie i: You 20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
l. Oth	er: Specify:	21.	+\$	0.00
2. Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	4,625.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	4,020.00
				4 205 20
22C	Add line 22a and 22b. The result is your monthly expenses.		\$	4,625.00
3. <b>Cal</b>	culate your monthly net income.			
23a	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,662.93
23b	. Copy your monthly expenses from line 22c above.	23b.	-\$	4,625.00
23c	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	37.93
_				
	you expect an increase or decrease in your expenses within the year after you f			and or degrees has
	example, do you expect to finish paying for your car loan within the year or do you expect your m ification to the terms of your mortgage?	юпgage р	ayment to incre	ase or decrease because of a
<b>=</b> 1				
	res. Explain here:			